RECEIPT FOR PROPERTY					
(Administrative Review Purposes Only)					
Departme	ent:	L	ocation:		
Name of I	Person from	m Whom Property Was Obt	tained:	☐ Owner	☐ Other (Specify)
Address:					
Purpose for Which Obtained:					
Item #: Quantity:					
I certify that I have received and hold myself responsible for the articles listed above:					
Date: Typed Name: Signature:					
CHAIN OF CUSTODY					
Item #:	Date:	Relinquished By:	Receiv	ved By:	Purpose of Change of Custody:
		Typed Name: Signature:	Typed Name Signature:	e :	
		Typed Name:	Typed Name	э:	
		Signature:	Signature:		
		Typed Name:	Typed Name	э:	
		Signature:	Signature:		
		Typed Name:	Typed Name	e:	
		Signature:	Signature:		
		Typed Name:	Typed Name	э:	
		Signature:	Signature:		